



STATE OF TENNESSEE DEPARTMENT OF FINANCE AND ADMINISTRATION DIVISION OF MENTAL RETARDATION SERVICES ANDREW JACKSON BUILDING, 15TH FLOOR 500 DEADERICK STREET NASHVILLE, TN 37243

MEMORANDUM

DATE:

February 12, 2007

TO:

Kathleen Clinton John Craven C.J. McMorran

FROM:

Stephen H. Norris

Deputy Commissioner

SUBJECT:

Failure to Obtain the Annual Level of Care Reevaluation (Recertification)

The Medicaid Home and Community Based Services waivers specify that an annual level of care reevaluation (recertification) be performed every 12 months by a Qualified Mental Retardation Professional, physician, or registered nurse and that the State will ensure timely reevaluations by making such reevaluations a component part of case management and Support Coordination. If the annual level of care reevaluation is not performed timely, Medicaid payment will not be available for any services provided during the gap between the due date and the date of the reevaluation.

This memo provides clarification regarding the actions to be taken when the annual level of care reevaluation has not been done in a timely manner.

- 1. If an Independent Support Coordinator fails to obtain the annual level of care reevaluation by the due date, the Independent Support Coordination (ISC) agency will be sanctioned in accordance with policy P-003 (Recoupment and Sanctions Policy). In addition to the sanction, there will be recoupment of the monthly payment to the ISC agency.
- 2. If a Case Manager fails to obtain the annual level of care reevaluation, the Regional Director or designee will meet with the case manager to emphasize the need to ensure a timely annual level of care reevaluation to avoid the unnecessary expenditure of DMRS state funds. If the case manager demonstrates a pattern of failure to perform timely annual level of care reevaluations, appropriate disciplinary action will be taken in accordance with DMRS personnel guidelines.
- Agencies that provided authorized services will be reimbursed with DMRS state funds rather than
 waiver funds for services provided during the period of the lapsed annual level of care
 reevaluation.

SHN:wlm

cc:

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